✚ ASIST

ASIST 11: Moves Beyond Managing Risk to Promoting Safety

For nearly thirty years, ASIST has provided suicide first-aid intervention training aimed at preventing the immediate risk of suicide. Building on and strengthening ASIST X's inclusion of a safe planning approach to helping, ASIST 11 completes a shift from a focus upon risk reduction to a focus upon safety enhancement. In ASIST 11, a life-assisting, suicide first-aid intervention's aim is to create safety-for-now.

Clearer Goal

This shift in perspective provides clarity about the goal of intervention. Risk is reframed as threats to safety. Actions are initiated to support safety needs; to preserve life when an imminent threat is present—such as a suicide in progress; to protect life when challenges to safety are identified—such as the presence of a suicide plan; and, to promote life-supporting elements—such as supports and strengths.

Safety is more than containing danger or decreasing negative, potentially harmful or life-threatening influences. Safety is fortified by measures that actively promote social supports and the coping strengths of people who are thinking about suicide. It is about actions that support life choices and assist life safety.

ASIST helps advance the growing shift to safety in suicide prevention.

For people familiar with risk-oriented approaches, viewing an intervention through the lens of safety invites a change in perspective. In suicide first aid, attention is given to what helps secure immediate safety rather than to the underlying vulnerabilities or longer-term, clinical assessment considerations. Risk assessments require judgments that are challenging to quantify accurately or make reliably, especially in the short time available in suicide first aid intervention. Risks, when identified, still have to be minimized and managed (reducing a negative) whereas safety is a positive outcome in and of itself.

Focusing upon safety encourages hope whereas focusing upon risk can sometimes increase fear. Gathering risk information has the potential to imply disorder, disease or disability. Interpreting the risk information may suggest that the helper is or needs to be an expert. This might cause the person at risk to become cautious. It might also cause a potential helper to feel that they cannot help when, with the help of the safety-for-now focus, they

certainly could. All of the things that need to be assessed in the traditional risk reduction approach can still be examined under ASIST 11's safety perspective but it can be done in a way that is more likely to feel collaborative and respectful.

Clearer Scope

This shift in perspective provides clarity about the scope of an intervention. Safety-for-now suggests that the time frame should vary with the circumstances. In some situations, safety-for-now might work out to be several days or weeks. In other circumstances, safety-for-now might only refer to the next several minutes.

Safety-for-now suggests that the scope of issues should be limited to those that affect safety now. Longer-term concerns such as healing from pain, relief from depression or growing through loss or recovery fall outside the scope of a suicide first-aid intervention. Emphasis upon them can be discouraging. Acknowledgment of such concerns is part of hearing the story but safety-for-now may mean providing some ideas on how future work on these kinds of issues could occur—or it could simply mean providing a place for a good night's sleep.

Safety-for-now sets a common goal while supporting the kind of flexible, common sense and practical approach a caregiver needs to use to achieve that goal.

Clearer Practice

ASIST 11's shift in perspective makes the diligence and good-care functions of an intervention feel like they are part of the same helping processes as the respectful and collaborative problem-solving processes. It helps caregivers offer help in a consistently helpful way and makes it less likely that they will compromise the processes needed to develop a workable safe plan that the person at risk can endorse.